

FORM

114

(REVISED 10-25-96)

**ARCHITECTURE & ENGINEERING DIVISION
PROFESSIONAL SERVICES INFORMATION FORM
FOR SMALL PROJECTS**

Instructions for Completing Form 114 (Numbers below correspond to numbers contained in form):

1. Give name, address, phone and fax numbers of the firm. List both street and mailing addresses (if different).
2. Give the year that the present firm was established.
3. Give the type of organization your firm is. List whether it is a sole proprietorship, partnership, corporation, etc. List your Federal Tax ID Number or your Social Security Number (if sole proprietorship).
4. List the names of two people in your firm (where possible) to be contacted about prospective projects.
5. List the total number of personnel (not including administrative positions) after each category listed. If not applicable, list "0".
6. List the firm name and address for each outside consultant and or associates that you usually employ. If not applicable, list "N/A".
7. List projects by category that your firm has done that are most applicable to the categories of work you are interested in performing for the state.
For each project listed, give the name and type of project, the location where the project took place, the year the work was completed, the name, address, and phone number of the Owner; and the final construction cost.
8. Through narrative discussion, show reasons why your firm believes it is especially qualified to undertake State-owned projects. Respondents may say anything they wish in support of their qualifications.
9. Place an "X" on the line corresponding to the category or categories of work for which your firm would like to be considered.
10. Completed forms should be signed by a principal of the firm.

ALL INFORMATION CONTAINED IN THE FORM SHOULD BE CURRENT AND FACTUAL.

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ARCHITECTURE & ENGINEERING DIVISION

PROFESSIONAL SERVICES INFORMATION FORM

FOR SMALL PROJECTS

1. Firm Name: _____ Phone No.: _____ Fax No.: _____

Address: _____ Mailing Address: _____

City: _____ State: _____ Zip Code: _____ City: _____ State: _____ Zip Code: _____

2. Year present firm was established?: _____

3. Type of Organization (Sole Proprietor, Partnership, Corporation)?: _____

Tax ID No.: _____

4. Names of persons to contact about prospective projects:

A. Name: _____ Title: _____ Phone No.: _____ Fax No.: _____

B. Name: _____ Title: _____ Phone No.: _____ Fax No.: _____

5. Total Personnel: (not including Admin):

Licensed Architect:	_____	Civil Engineer:	_____
CAAD Operator:	_____	EIT:	_____
AIT:	_____	Environmental:	_____
Mechanical Engineer:	_____	Energy Analysis:	_____
Electrical Engineer:	_____	Construction Inspector:	_____
Structural Engineer:	_____	Interior Design:	_____



6. Outside Associates & Consultants Usually Employed by Your Firm. Please List Firm Name and Address:

A. Architect: Name:_____	Phone No.:_____	Fax No.:_____
—		
B. Landscape Architect: Name:_____	Phone No.:_____	Fax No.:_____
—		
C. Civil Engineer: Name:_____	Phone No.:_____	Fax No.:_____
—		
D. Structural Engineers: Name:_____	Phone No.:_____	Fax No.:_____
—		
E. Mechanical Engineers: Name:_____	Phone No.:_____	Fax No.:_____
—		
F. Electrical Engineers: Name:_____	Phone No.:_____	Fax No.:_____
—		
G. Surveyor: Name:_____	Phone N.:_____	Fax No.:_____
—		
H. Other Consultants: Name:_____		Fax No.:_____
—		
		Fax No.:_____

7. List Projects by Category Which Best Typify Your Firm's Work Over the Last Three (3) Years.

Name and Type of Project:	Location of Project:	Year Your Work Completed:	Name and Address and Phone Number of Owner:	Construction Cost:

8. Use This Space to Provide any Additional Information or Description of Resources Supporting Your Firm's Qualifications.

9. Category of work under \$250,000 for which your firm would like to be considered. Please place an "X" in the appropriate space. Refer to the enclosed "Categories of Work for Projects Under \$25,000" page for a description of each category.

ARCHITECTURAL CATEGORIES

___ Building Modifications

___ Roofing

___ New Construction

___ Landscape Architecture

___ Historic Restoration

ENGINEERING CATEGORIES

___ Mechanical

___ Environmental

___ Electrical

___ Civil

___ Structural

___ Energy Analysis

10.

Signature: _____ **Typed Name and Title:** _____ **Date:** _____

